

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Robert Alan Reiner
Name

(2) 110 EAST PALM Drive
Address (number and street)

MARGATE FL 33063
City, State, Zip Code

OFFICE USE ONLY

MAY 31 2023

QUALIFYING OFFICES

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: COMMISSIONER SENT #2

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 05/01/23 To 05/31/23 Report Type: 2023 ms

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0, ____, ____. ____

Loans \$ 0, ____, ____. ____

Total Monetary \$ 0, ____, ____. ____

In-Kind \$ 0, ____, ____. ____

(7) Expenditures This Report

Monetary Expenditures \$ 3,000. ____

Transfers to Office Account \$ ____, ____, ____. ____

Total Monetary \$ 3,000. ____

(8) Other Distributions

\$ ____, ____, ____. ____

(9) TOTAL Monetary Contributions To Date

\$ 1,500

(10) TOTAL Monetary Expenditures To Date

\$ 7,173.30

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Robert Alan Reiner

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

[Signature]

X
Signature

(Type name) Robert Alan Reiner

Candidate Chairperson (only for PC and PTY)

[Signature]

X
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Robert Alan Reiner (2) I.D. Number 1 2023

(3) Cover Period 05/01/23 through 05/31/23 (4) Page 1 of 1

MARGATE
MAY 31 2023
QUALIFYING OFFICES

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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MARGATE

MAY 31 2023

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name ROBERT ALAN REINER

(2) I.D. Number _____

(3) Cover Period 05/01/23 through 05/31/23

(4) Page _____ of _____

QUALIFYING OFFICES

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
05/04/23 1	KOMIM KAVES INC 110 EAST palm drive margate, FL 33063	EVENT TABLE			150.00
05/04/23 2	KOMIM KAVES INC 110 E palm drive MARGATE, FL 33063	EVENT Table			150.00
11					
11					
11					
11					
11					
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